

### Examination Time Table

Date	Time	Subject
07.02.2026	1.00 pm – 4.00 pm	MHRM 5231 - Performance and Compensation Management
14.02.2026	9.00 am – 12.00 noon	MHRM 5232 - Labour Law and Industrial Relations
28.02.2026	9.00 am – 12.00 noon	MHRM 5233 - Organizational Behaviour

  
Mr. KDM Hewage  
Coordinator – HRM Unit



**For Repeat Students**

**INSTITUTE OF HUMAN RESOURCE ADVANCEMENT  
UNIVERSITY OF COLOMBO**

(For office use only)

Index Number

.....

**Certificate / Diploma / Executive Diploma / Higher Diploma / Master  
Repeat Examination**

**Name of the Course** (-.....)

**Semester** (-.....)  
(Please write in block letters)

1. Registration No in IHRA (-.....)

2. Index No (-.....)

3. Full Name (English) (-.....)

(Sinhala) (-.....)

Name denoted by initials (English) (-.....)

(Sinhala) (-.....)

4. Gender

Mr	
Ms	

5. Postal Address (-.....)

6. Email Address (-.....)

7. Telephone Numbers Office .....

Residence .....

Mobile .....

8. National Identity Card No .....

9. Medium .....

10. Subjects and Subjects code to be taken at the examination

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.....	.....
.....	.....
.....	.....
.....	.....

11. I certify that the above mentioned details are correct and I have properly registered for the above examination.

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Date: .....

Signature of the Candidate

Please handover the duly filled hardcopy of the application with payment receipts and board decision letters on or before ..... to the Examination Branch through Coordinator.

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Application checked

**Accepted / Not Accepted**

Date: .....

.....  
Signature of Subject Clerk

Attendance .....

The above named student has been permitted / not permitted to sit the above- mentioned subjects at the Examination in Certificate / Diploma / Executive Diploma / Higher Diploma / Master

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Date : .....

.....  
Coordinator